### Case 16-34034 Doc 1 Filed 10/25/16 Entered 10/25/16 15:29:29 Desc Main Document Page 1 of 61

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 12 Chapter 13

#### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Kinzie	
		First name	First name
	Write the name that is on	0	
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Harris	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the	First name	First name
	last 8 years		
	Include your married or maiden names.	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX	xxx - xx-
	Social Security	OR	OR
	number or federal Individual Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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Debtor 1 Kinzie First Name	O Middle Name	Harris Last Name	Case number (if known)
	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer	I have not used any busines	s names or EINs.	I have not used any business names or EINs.
Identification Numbers (EIN) you have used in the	Business name		Business name
last 8 years	Business name		Business name
Include trade names and doing business as names	EIN		EIN
	EIN		EIN
5. Where you live	7333 N. Ridge Blvd., Unit 312		If Debtor 2 lives at a different address:
	Number Street		Number Street
	Chicago Illinois City State	60645 Zip Code	City State Zip Code
	Cook		
	County  If your mailing address is diffe fill it in here. Note that the court this mailing address.		County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street		Number Street
	City State	Zip Code	City State Zip Code
6. Why you are choosing this district to file for bankruptcy	Check one:  ✓ Over the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in this district longer the last 180 days before lived in the last 180 day		Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1 Kinzie First Name	O Middle Name	Harris Last Name	Case number (if known)
Part 2: Tell the Court Al	oout Your Bankruptcy	Case	
7. The chapter of the Bankruptcy Code you are choosing to file under	B2010)). Also, go to the top	scription of each, see <i>Notice Required</i> and of page 1 and check the appropriate bo	by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Formox.
8. How you will pay the fee	court for more det may pay with casl on your behalf, yo  I need to pay the Individuals to Pay  I request that my By law, a judge maless than 150% of the fee in installm	ails about how you may pay. The cashier's check, or money of ur attorney may pay with a cree fee in installments. If you che your Filing Fee in Installments (fee be waived (You may requay, but is not required to, waive the official poverty line that approximately.	uest this option only if you are filing for Chapter 7. The your fee, and may do so only if your income is pplies to your family size and you are unable to pay n, you must fill out the Application to Have the
9. Have you filed for bankruptcy within the last 8 years?	✓ No.  Yes. District  District  District	When When When	MM / DD / YYYY  Case number
10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	✓ No.  Yes. Debtor  District  Debtor  District	When When	Relationship to you  Case number, if known  MM / DD / YYYYY  Relationship to you
11. Do you rent your residence?	✓ No. Go to  Yes. Fill ou	line 12.	t you and do you want to stay in your residence?  dgment Against You (Form 101A) and file it with

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Debt	tor 1 Kinzie		O	dla Nama	Harris	Case number (	if known)		
Dont		v Bus							
F f t t t t t t t t t t t t t t t t t t	Are you a sole proprietor of any ull- or part-time pusiness?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a	y Bus	No.	dle Name  es You Own as a S  Go to Part 4.  Name and location of b  Name of business, if a  Number  City  Check the appropriate  Health Care Bu	Street  e box to describe	State	Zip Code		
а	separate sheet and attach it to this petition.			Single Asset Ro	eal Estate (as de s defined in 11 U.S oker (as defined in	fined in 11 U.S.C. § 101(51	,		
E a	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	dead opera	llines. If y ations, ca	ou indicate that you are	a small business	v whether you are a small b debtor, you must attach you ax return or if any of these o	ur most recent bala	nce sheet, statement of	in 11
s	For a definition of small business debtor, see 11 U.S.C. 101(51D).		No. No. Yes.	Bankruptcy Code.	ter 11, but I am N	IOT a small business debtor			de.
Part	4: Report if You Ov	n or	Have A	Any Hazardous Pr	operty or An	y Property That Nee	ds Immediate	Attention	
a p te it	Do you own or have any property that poses or is alleged o pose a threat of mminent and dentifiable hazard o public health or			What is the hazard?  If immediate attention is	needed, why is it	needed?			
s c t	safety? Or do you own any property hat needs mmediate attention?			Where is the property?	Number	Street			
c b t	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	Stat	e	Zip Code	

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#### Debtor 1 Kinzie Harris Case number (if known) First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be

credit counseling with the court.

Active duty.

unable to participate in a briefing in

internet, even after I reasonably tried

I am currently on active military duty in

person, by phone, or through the

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

unable to participate in a briefing in

internet, even after I reasonably tried

I am currently on active military duty in

person, by phone, or through the

a military combat zone.

to do so.

If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

Active duty.

credit counseling with the court.

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Debtor 1 Kinzie	O Middle Name	Harris Case number (if know	vn)
Part 6: Answer These Qu	uestions for Reporting Purpo		
16. What kind of debts do you have?	16a. Are your debts primari 101(8) as "incurred by a  ☐ No. Go to line 16b. ☐ Yes. Go to line 17.  16b. Are your debts primari obtain money for a busir investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17.	ly consumer debts? Consumer debts in individual primarily for a personal, far ly business debts? Business debts an ess or investment or through the open you owe that are not consumer debts	amily, or household purpose."  are debts that you incurred to ration of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be avail  No.  Yes.	er 7. Go to line 18.  Do you estimate that after any exempt property lable to distribute to unsecured creditors?	is excluded and administrative expenses are
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Part 7: Sign Below			
For you	and correct.  If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chall fino attorney represents me ame fill out this document, I had I request relief in accordance I understand making a false sconnection with a bankruptcy years, or both. 18 U.S.C. §§ 1  /s/ Kinzie Harris Signature of Debtor 1  Executed on	Chapter 7, I am aware that I may produce I States Code. I understand the relief apter 7.  and I did not pay or agree to pay some average obtained and read the notice requivers with the chapter of title 11, United Statement, concealing property, or obtained case can result in fines up to \$250,000 (152, 1341, 1519, and 3571.	eone who is not an attorney to help ired by 11 U.S.C. § 342(b). ates Code, specified in this petition. aining money or property by fraud in 00, or imprisonment for up to 20

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Debtor 1 Kinzie	0	Harris	Case number	(if known)	
First Name	Middle Name	Last Name			
For your attorney, if you are represented by one  If you are not represented by an attorney, you do not need to file this page.	eligibility to proceed un the relief available und to the debtor(s) the no	nder Chapter 7, 11, 1 der each chapter for tice required by 11 L	12, or 13 of title 11, l which the person is J.S.C. § 342(b) and,	that I have informed the debtor(s) ab Jnited States Code, and have explain eligible. I also certify that I have deli in a case in which § 707(b)(4)(D) app nation in the schedules filed with the	ned ivered olies,
	Signature of Attorney	for Debtor		MM / DD / YYYY	
	Mike Miller Printed name  Semrad Law Firm Firm name  20 S. Clark Street Street 28th Floor				
	Chicago		Illinois	60603	
	City		State	Zip Code	
	Contact phone	3122844902	Email address		
			Illir	nois	
	Bar number		Sta	ate	

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Fill in this info	ormation to identify your cas	e:		
Debtor 1	Kinzie	0	Harris	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if fili	ing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Otato)	

Check if this is ar
amended filing

12/15

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets
	Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
Ta. Copy line 35, Total real estate, from <i>Schedule Arb</i>	#0.000.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$6,990.00
1c. Copy line 63, Total of all property on Schedule A/B	\$6,990.00
Part 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$0.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	<u></u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$3,055.00
Your total liabilities	\$3,055.00
Part 3: Summarize Your Income and Expenses	
Cummunize rour moonie and Expenses	
4. Schedule I: Your Income (Official Form 106I)	\$1,466.40
Copy your combined monthly income from line 12 of Schedule I	φ1,που.πο
5. Schedule J: Your Expenses (Official Form 106J)	\$1,825.00
Copy your monthly expenses from line 22, Column A, of Schedule J	ψ1,020.00

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Del	otor 1	Kinzie	0	Harris	Case n	umber (if known)	
		First Name	Middle Name	Last Name			
Par	t 4:	Answer These Questions	for Administrative	ve and Statistical	Records		
6. <b>A</b>	re yo	ou filing for bankruptcy under Cl	hapters 7, 11, or 13?				
		lo. You have nothing to report on th	is part of the form. Ch	eck this box and submit	this form to the co	urt with your other schedul	es.
	<b>✓</b> Y	es.					
7. <b>V</b>	Vhat I	kind of debt do you have?					
		our debts are primarily consum amily, or household purpose. 11 U.S			, ,	, ,	
		our debts are not primarily consists form to the court with your other		ve nothing to report on t	his part of the form	a. Check this box and subm	nit
8.		n the <i>Statement of Your Curren</i> 122A-1 Line 11; <b>OR</b> , Form 122B L	•	1,,,	nonthly income fro	m Official	\$1,714.32
9.	Cop	by the following special categor	ies of claims from P	art 4, line 6 of Schedu	le E/F:		
	Fro	m Part 4 on Schedule E/F, copy	the following:			Total claim	
	9a. l	Domestic support obligations (Cop	by line 6a.)			\$0.00	
	9b.	Taxes and certain other debts you o	owe the government. (	Copy line 6b.)		\$0.00	
	9c. (	Claims for death or personal injury	while you were intoxic	cated. (Copy line 6c.)		\$0.00	
	9d. \$	Student loans. (Copy line 6f.)				\$0.00	
		Obligations arising out of a separa	tion agreement or divo	orce that you did not rep	oort as	\$0.00	
	·	Debts to pension or profit-sharing p	blans, and other simila	ar debts. (Copy line 6h.)		\$0.00	
	9g. '	<b>Total.</b> Add lines 9a through 9f.				\$0.00	

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Fill in this	information to identify your case:				
Debtor 1	Kinzie	0	Harris		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse,	if filing) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	Northern	District of Illinois		
			(State)		
Case nun					
	al Form 106A/B				Check if this is an amended filing
n each ca ategory v	where you think it fits best. Be	cribe items. List an asset as complete and accurat	t only once. If an asset fits in more that te as possible. If two married people a	re filing together, both are	et in the equally
n each ca ategory v esponsib rrite your Part 1:	ategory, separately list and desc where you think it fits best. Be a ble for supplying correct inform name and case number (if kno Describe Each Residenc	cribe items. List an asset as complete and accurat nation. If more space is r own). Answer every quest ee, Building, Land, c	te as possible. If two married people a needed, attach a separate sheet to thi	re filing together, both are s form. On the top of any a or Have an Interest In	et in the equally dditional pages,
n each ca ategory v esponsib rrite your Part 1:	ategory, separately list and desc where you think it fits best. Be a ble for supplying correct inform name and case number (if kno Describe Each Residenc	cribe items. List an asset as complete and accurat nation. If more space is r own). Answer every quest ee, Building, Land, c	te as possible. If two married people a needed, attach a separate sheet to thi tion. or Other Real Estate You Own	re filing together, both are s form. On the top of any a or Have an Interest In	et in the equally dditional pages,
n each ca tategory v esponsib vrite your Part 1:	ategory, separately list and desc where you think it fits best. Be a ble for supplying correct inform name and case number (if kno Describe Each Residenc u own or have any legal or equi	cribe items. List an asset as complete and accurat nation. If more space is r own). Answer every quest ee, Building, Land, c	te as possible. If two married people a needed, attach a separate sheet to thi tion. or Other Real Estate You Own	re filing together, both are s form. On the top of any a or Have an Interest In	equally dditional pages,
n each ca ategory v esponsib rrite your Part 1:	ategory, separately list and desc where you think it fits best. Be a ble for supplying correct inform r name and case number (if kno Describe Each Residenc u own or have any legal or equi No. Go to Part 2	cribe items. List an asset as complete and accurat nation. If more space is rown). Answer every quest e.e., Building, Land, contable interest in any resident ther description.	te as possible. If two married people a needed, attach a separate sheet to thi tion.  Or Other Real Estate You Own didence, building, land, or similar properties the property? Check all that apply. gle-family home	re filing together, both are s form. On the top of any a or Have an Interest In	et in the equally dditional pages,  laims or exemptions. Pued claims on Schedule D
n each ca ategory vesponsib rite your Part 1:	where you think it fits best. Be a where and case number (if kno Describe Each Residence u own or have any legal or equi No. Go to Part 2  Yes. Where is the property?	cribe items. List an asset as complete and accurat as complete and accurat nation. If more space is rown). Answer every questice, Building, Land, contable interest in any resingular ther description the contable interest in any resingular therefore in any resingular therefore in any resingular therefore in any resingular the contable interest in any resingular therefore in any resingular the any resingular therefore in a	te as possible. If two married people a needed, attach a separate sheet to thi tion.  or Other Real Estate You Own idence, building, land, or similar properties the property? Check all that apply.	or Have an Interest Interty?  Do not deduct secured of the amount of any secured of the amount	et in the equally dditional pages,  laims or exemptions. Pued claims on Schedule L

Who has an interest in the property? Check

At least one of the debtors and another

What is the property? Check all that apply.

Other information you wish to add about this item, such as local

Debtor 1 and Debtor 2 only

property identification number:

Duplex or multi-unit building

Condominium or cooperative

Manufactured or mobile home

Single-family home

Investment property

Land

Timeshare

Check if this is community property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:

Describe the nature of your ownership

interest (such as fee simple, tenancy by

the entireties, or a life estate), if known.

Check if this is community property

Creditors Who Have Claims Secured by Property.

Current value of the

portion you own?

(see instructions)

Current value of the

entire property?

Other

Debtor 1 only Debtor 2 only

Citv

Number

City

1.2

State

Street address, if available, or other description

If you own or have more than one, list here:

Street

State

Zip Code

Zip Code

Who has an interest in the property? Check (see instructions) Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local

property identification number:

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Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name	Case number	(if known)	
1.3	et address, if available, or other		What is the property? Check all that ap Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	ply.	Do not deduct secured cl the amount of any secure Creditors Who Have Cla Current value of the entire property?	•
Nun City		Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sinthe entireties, or a life of the entireties).	mple, tenancy by
		] ] ] 0	Who has an interest in the property?  Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another Other information you wish to add ab property identification number:	er	Check if this is cor (see instructions)	nmunity property
		n you own for a	III of your entries from Part 1, including			
<b>Do you ov</b> you own th	at someone else drives. If you le ns, trucks, tractors, sport utility v	ase a vehicle, als	n any vehicles, whether they are regis so report it on Schedule G: Executory Cor rcles			
Ye:	5					
3.1	Make		Who has an interest in the propeone.  Debtor 1 only	rty? Check	Do not deduct secured of the amount of any secure Creditors Who Have Cla	•
	Approximate mileage:  Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this is community preinstructions)		Current value of the entire property?	Current value of the portion you own?
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prope one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this is community pro	nother	Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property?	
			instructions)			

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	Kinzie First Name	O Middle Name	Harris Last Name	Case number	(II KIIOWII)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions)	/ and another	· ·	aims or exemptions. Put ed claims on Schedule D: iims Secured by Property.  Current value of the portion you own?
	mples: Boats, trailers, motors,	es, ATVs and other	Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions)  recreational vehicles, other with the other series of the debtors in the communication of the debtors of th	/ and another ity property (see /ehicles, and acces	Creditors Who Have Cla  Current value of the entire property?  sories	aims or exemptions. Put d claims on Schedule D: hims Secured by Property.  Current value of the portion you own?
4.1	No Yes  Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions)	/ and another	•	laims or exemptions. Put ad claims on Schedule D: hims Secured by Property.  Current value of the portion you own?
	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is commur instructions)  f your entries from Part 2, in	/ and another lity property (see	Creditors Who Have Cla  Current value of the entire property?	laims or exemptions. Put ded claims on Schedule D: hims Secured by Property.  Current value of the portion you own?

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D	ebtor 1	Kinzie	0	Harris	Case number (if known)	
		First Name	Middle Name	Last Name		
			Your Personal and Househ		following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
		_	s and furnishings bliances, furniture, linens, china, kitcl	henware		
✓	Yes. D	escribe	Used Furniture			\$900.00
	7. Electi Exampl No		s and radios; audio, video, stereo, a	and digital equipment; compute	rs, printers, scanners; music	
<b>✓</b>	Yes. D	escribe	Used Electronics			\$900.00
	Examp	•	lue and figurines; paintings, prints, or ot oin, or baseball card collections; oth		•	
쓷	•	) o o o rib o				
Ш	res. L	escribe				
		les: Sports, pl	orts and hobbies notographic, exercise, and other hob ks; carpentry tools; musical instrume		ables, golf clubs, skis; canoes	
✓	No					_
	Yes. D	escribe				
	No		les, shotguns, ammunition, and rela	ted equipment		] <del></del>
	I1. Clot Examp		clothes, furs, leather coats, designe	r wear, shoes, accessories		
	No					
⊻	Yes. D	escribe	Used Clothing			\$350.00
	I2. Jewe Exampl	•	iewelry, costume jewelry, engageme er	nt rings, wedding rings, heirlod	om jewelry, watches, gems,	
<u>_</u>	•	escribe	Misc Jewelry			\$80.00
	Examp No		Is ts, birds, horses			
Н	I Ies. L	escribe				
	I <b>4. Any</b> No	other persor	nal and household items you did	not already list, including ar	ny health aids you did not list	
Ē		escribe				
			alue of all of your entries from Pa			\$2230.00

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Debt	or 1	Kinzie First Name	O Middle Name	Harris Last Name	Case number (if known)	
Part	۸٠	Describe Your F		Last Name		
			ny legal or equitable inte	erest in any of the fo	ollowing?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>C</b>	Cash					
E	xamı	ples: Money you have	in your wallet, in your home, in a s	afe deposit box, and on har	nd when you file your petition	
	Ц	No				<b>#</b> 000 00
	✓				Cash:	\$300.00
17.	Exa		vings, or other financial accounts; itutions. If you have multiple acco		res in credit unions, brokerage houses, on, list each.	
		No		1		
	<b>✓</b>	Yes		Institution name:		
			17.1. Checking account:	PNC		\$160.00
			17.2. Checking account:			
			17.3. Savings account:			
			17.4. Savings account:			
			17.5. Certificates of deposit:			
			17.6. Other financial account:			
			17.7. Other financial account:			
			17.8. Other financial account:			
			17.9. Other financial account:			
18.			or publicly traded stocks	firms manay market acco	······································	
	Exa	mpies: Bona iunas, in No	vestment accounts with brokerage	mirns, money market accor	unis	
		Yes	Institution or issuer name:			
19.		n-publicly traded sto LC, partnership, a		ed and unincorporated l	businesses, including an interest in	
	_	No	na joint venture			
		Yes. Give specific	Name of entity		% of ownership:	
		information about them				

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Debt	or 1	Kinzie	0	Harris	Case number (if known)		
		First Name	Middle Name	Last Name			
20. Government and corporate bonds and other negotiable and non-negotiable instruments							
			nclude personal checks, cashiers'				
	Non	ı-negotiable instrumeı	nts are those you cannot transfer	to someone by signing of	or delivering them.		
	✓	No					
		Yes. Give specific					
		information about	Issuer name:				
		them					
						-	
21.	Ret	irement or pension	accounts				
				, thrift savings accounts	, or other pension or profit-sharing plans		
	<b>✓</b>	No					
	П	Yes. List each	Type of account:	Institution name:			
	_	account	401(k) or similar plan:				
		separately.	Pension plan:				
			IRA:				
			Retirement account:	-			
			Keogh:				
			Additional account:				
			Additional account:	-			
22	800	urity deposite and r	ronovmonto				
		urity deposits and p	deposits you have made so that yo	ou may continue service o	or use from a company		
	Exa	mples: Agreements v	vith landlords, prepaid rent, public	c utilities (electric, gas, v	vater), telecommunications		
	com	panies, or others					
	✓	No		Institution name:			
		Yes	Electric:				
			Gas:				
			Heating oil:				
			Security deposit on rental unit:				
			Prepaid rent:				
			Telephone:				
			Water:				
			Rented furniture:				
			Other:				
23.	Ann	nuities (A contract for	a periodic payment of money to	you, either for life or for a	number of years)		
	<b>✓</b>	No					
		Yes	Issuer name and description:				
	_						

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Debt	tor 1 Kinzie O First Name Mic	Harris  ddle Name  Last Name	Case number (if known)	
24.		account in a qualified ABLE program, or	under a qualified state tuition program	
	No Institution name and description	cription. Separately file the records of any inte	erests.11 U.S.C. § 521(c):	
25.		in property (other than anything listed in	line 1), and rights or powers	
	exercisable for your benefit  No			
	Yes. Describe			
26.		de secrets, and other intellectual property sites, proceeds from royalties and licensing a		
	√ No	,, , , , , , , , , , , , , , , , , , ,		1
	Yes. Describe			
27.	Licenses, franchises, and other gene Examples: Building permits, exclusive licenses.	eral intangibles censes, cooperative association holdings, liq	uor licenses, professional licenses	
	✓ No  Yes. Describe			
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	✓ Yes. Give specific information	Anticipated 2016 Tax Refund	Federal:	\$4300.00
	about them, including whether you already filed the returns and the tax years		State:	\$0.00
	Family support		Local:	\$0.00
	Examples: Past due or lump sum alimony  No	, spousal support, child support, maintenance	, divorce settlement, property settlement	
	Yes. Give specific information		Alimony:	\$0.00
			Maintenance:	\$0.00
				*
			Support:	\$0.00 \$0.00
			Support:  Divorce settlement:  Property settlement:	\$0.00 \$0.00 \$0.00
30.		ance payments, disability benefits, sick pay, v	Divorce settlement: Property settlement:	\$0.00
30.	Examples: Unpaid wages, disability insura Social Security benefits; unpai	rance payments, disability benefits, sick pay, viid loans you made to someone else	Divorce settlement: Property settlement:	\$0.00
30.	Examples: Unpaid wages, disability insura		Divorce settlement: Property settlement:	\$0.00

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Deb	otor 1 Kinzie	0	Harris	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance policies				
	Examples: Health, disability, or lif	e insurance; health savi	ngs account (HSA); credit, ho	meowner's, or renter's insurance	
	✓ No				
	=	Comp	any name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance cor		•	·	
	of each policy and list its valu				
32.	Any interest in property that is	due vou from someo	ne who has died	· ·	
0	If you are the beneficiary of a livir			r are currently entitled to receive	
	property because someone has d		1 7	,	
	✓ No				
	Yes. Describe				
33.	Claims against third parties, w			demand for payment	
	Examples: Accidents, employment	nt disputes, insurance c	aims, or rights to sue		
	<b>✓</b> No				
	Yes. Describe				
24	Other continuent and unliquid	detect eleime of avenu	mata imaldima.aamtara	aimo of the debter and vights	
34.	Other contingent and unliquid to set off claims	dated Claims of every	nature, including counterc	ains of the deptor and rights	
	—				
	<b>✓</b> No				
	Yes. Describe				
35.	Any financial assets you did no	ot already list			
	No.				
	✓ No				
	Yes. Describe				
36	Add the dollar value of all of y	our entries from Part	1 including any entries for	nages you have attached	
00.	for Part 4. Write that number h				\$4760.00
Part	5: Describe Any Busine	ss-Related Proper	ty You Own or Have a	n Interest In. List any real estate	in Part 1.
37.	Do you own or have any legal	or equitable interest in	any business-related prop	erty?	
	No. Code Bort C				Current value of the
	✓ No. Go to Part 6.				portion you own?
	Yes. Go to line 38.				Do not deduct secured claims
					or exemptions
38.	Accounts receivable or commi	ssions you already ea	rned		
	_				
	✓ No				
	Yes. Describe				
	_				
39.	Office equipment, furnishings	s, and supplies			
			ns, printers, copiers, fax mach	ines, rugs, telephones, desks, chairs, electr	onic devices
	—		•		
	✓ No				
	Yes. Describe				

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Deb	tor 1	Kinzie	O Middle News	Harris	Case number (if known)	
40.	Mar	First Name	Middle Name	Last Name use in business, and tools of	vour trade	
40.		No	uipinent, supplies you	use in business, and tools of	your trade	
		Yes. Describe				7
	ш	res. Bescribe				
44						
41.		entory				
	$   \angle $	No				-1
	Ш	Yes. Describe				
		in the second se				
42.		-	ips or joint ventures			
	$\mathbf{\Lambda}$	No		Name of entity:	% of ownership:	
		Yes. Give specific information about			,	
		them				<del>_</del>
						<u> </u>
43. (	Cust	omer lists, mailing	lists, or other compilat	ions		
	<b>✓</b>	No				
	Ш	Yes. Do your lists in	clude personally identifial	ole information (as defined in 11 l	J.S.C. § 101(41A))?	
		☐ No				
		Yes. Descr	ribe			
44.	Αny	/ business-related p	property you did not alre	eady list		
		No	. ,,	•		
	Ħ	Yes. Give specific				
		information				
45. A	dd tl	he dollar value of a	II of your entries from P	art 5, including any entries fo	r pages you have attached	
Part	6:	<b>Describe Any F</b> If you own or have ar	Farm- and Commer	cial Fishing-Related Pro in Part 1.	perty You Own or Have an Interes	t In.
46.	Do	you own or have a	ny legal or equitable int	erest in any farm- or commerc	cial fishing-related property?	
	<b>✓</b>	No. Go to Part 7.				Current value of the
		Yes. Go to line 47.				portion you own?  Do not deduct secured
						claims
47	Far	m animals				or exemptions
			ultry, farm-raised fish			
	<b>✓</b>	No				
	Ī	Yes. Describe				]
						_

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Debto	or 1	Kinzie	O Middle Magaz	Harris	Case number (if known)	
40		First Name	Middle Name	Last Name		
48.	_	ps-either growing	or narvested			
	⊻	No				
	Ш	Yes. Describe				
	_	l				
49.	Far	m and fishing equi	pment, implements, machinery, t	ixtures, and tools of trade		
	_	No				
	H	Yes. Describe				
	ш	ics. Describe				
	-					
50.	Far	m and fishing supp	olies, chemicals, and feed			
	<b>✓</b>	No				
		Yes. Describe				
51.	Anv	farm- and comme	rcial fishing-related property you	did not already list		
•	_		roun norming rounds property you	and not an oddy not		
	넴	No Van Danariha				
	ш	Yes. Describe				
	-				·	
52. Ad	ld th	ne dollar value of a	II of your entries from Part 6, incl	uding any entries for page	s vou have attached	
			here			
					•	
Part 7	7:	Describe All Pr	operty You Own or Have a	n Interest in That You	Did Not List Above	
			perty of any kind you did not alre	ady list?		
		mples: Season ticket	s, country club membership			
	✓	No				1
		Yes. Give specific				
		information				
54. Ad	ld th	e dollar value of a	II of your entries from Part 7. Writ	e that number here	<b>&gt;</b>	
Part 8	3:	List the Totals	of Each Part of this Form			
55. <b>P</b> a	art 1	l: Total real estate,	line 2			
56 n	art 2	total vehicles, line	5.5			
-			nd household items, line 15	******	<del>_</del>	
		-		\$2230.00	<u> </u>	
58. <b>P</b> a	ırt 4	: Total financial ass	sets, line 36	\$4760.00	<u> </u>	
59. <b>P</b> a	art 5	5: Total business-re	elated property, line 45			
60. <b>P</b> a	art 6	6: Total farm- and f	ishing-related property, line 52		<del>_</del>	
					<del>_</del>	
			erty not listed, line 54			
62. <b>T</b> o	otal	personal property.	Add lines 56 through 61	\$6990.00	_	+ \$6990.00
					Copy personal property total	
						\$6990.00
63. <b>T</b> c	tal o	of all property on S	Schedule A/B. Add line 55 + line 62			

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Fill in this information to identify your case:						
Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name			
Debtor 2 (Spouse, if fil	ing) First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number ((If known)						

#### Official Form 106C

### Check if this is an amended filing

#### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt						
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption				
	Brief description: PNC Line from Schedule A/B: 17	\$160.00	\$160.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
	Brief description: on hand Line from Schedule A/B: 16	\$300.00	\$300.00  100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covers No Yes	3 years after that for ca						

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Debtor 1		0	Harris	Case number (if known)	
	First Name	Middle Name	Last Name		
art 2:	Additional Page				
line	of description of the property a on Schedule A/B that lists this perty			the exemption you claim one box for each exemption.	Specific laws that allow exemption
Line	f cription: <u>Used Furniture</u> from edule A/B: 06	\$900.00		\$160.00 fair market value, up to any le statutory limit	735 ILCS 5/12-1001(b)
Line	f cription: Used Clothing from edule A/B: 11	\$350.00		\$350.00 fair market value, up to any le statutory limit	735 ILCS 5/12-1001(a)
Line	ription:  Misc Jewelry  from	\$80.00		\$80.00 fair market value, up to any le statutory limit	735 ILCS 5/12-1001(b)
Brie desc	f cription:  Used Electronics from edule A/B: 07	\$900.00		\$0 fair market value, up to any ole statutory limit	735 ILCS 5/12-1001(b)
Line	f cription:  Anticipated 2016 Tax  Refund  from edule A/B: 28	\$4,300.00		\$1,000.00; \$3,300.00 fair market value, up to any sle statutory limit	735 ILCS 5/12-1001(g)(1); 735 ILCS 5/12-1001(b)

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Fill in	n this information to identify your cas	e:				
Deb	tor 1 Kinzie	0	Harris			
	First Name	Middle Name	Last Name			
Deb	tor 2					
(Spo	ouse, if filing) First Name	Middle Name	Last Name			
Unite	ed States Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
	e number nown)					
Off	ficial Form 106D			<u> </u>		Check if this is ar amended filing
Sc	hedule D: Credi	tors Who Ha	ve Claims Secu	red by Pro	pertv	12/1
space and c	e is needed, copy the Additional l case number (if known).	Page, fill it out, number th	e are filing together, both are equa le entries, and attach it to this forn			
1.	Do any creditors have claims sec					
	Yes. Fill in all of the information	·	our other schedules. You have nothing	g eise to report on this to	orm.	
Part	1: List All Secured Claims	<b>S</b>				
	List all secured claims. If a credito			Column A	Column B	Column C
	for each claim. If more than one cre much as possible, list the claims in	'		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any

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					<u></u>			
Fill	in this inform	ation to identify your cas	se:					
Deb	otor 1	Kinzie	0	Harris				
		First Name	Middle Name	Last Name				
	otor 2 ouse, if filing	First Name	Middle Name	Last Name				
Unit	ted States Ba	ankruptcy Court for the:	Northern	District of Illinois (State)				
	se number			(State)				
(If kı	nown)					_		
Of	ficial F	orm 106E/F					eck if this is an	n amended filing
Sc	hedu	le E/F: Cre	editors Who	Have Unsecure	ed Claims			12/15
party 106A that	/ to any exe /B) and on are listed in es in the bo	cutory contracts or un Schedule G: Executor Schedule D: Creditor	expired leases that could by Contracts and Unexpire S Who Hold Claims Secu	rs with PRIORITY claims and Pa result in a claim. Also list execut d Leases (Official Form 1066). D red by Property. If more space is a this page. On the top of any ad	ory contracts on <i>Sch</i> o not include any cre needed, copy the Pa	edule A/B: editors with art you nee	Property (Of partially sec d, fill it out, n	fficial Form cured claims number the
Par	List A	All of Your PRIORIT	TY Unsecured Claims	3				
1.	Do any cre	editors have priority ur	nsecured claims against ye	ou?				
	✓ No. G	o to Part 2.						
	Yes.							
2.	listed, ident much as po Continuation	ify what type of claim it is pssible, list the claims in a on Page of Part 1. If more	s. If a claim has both priority a alphabetical order according e than one creditor holds a p	ore than one priority unsecured cla and nonpriority amounts, list that cla to the creditor's name. If you have particular claim, list the other credito or this form in the instruction booklet	im here and show both more than two priority rs in Part 3.	n priority and	nonpriority an	nounts. As
						Total	Priority	Nonpriority

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Debto	or 1	Kinzie O	Harr		Case number (if known)	
		First Name Middle Name	Last	Name		
Part 2	2:	List All of Your NONPRIORITY Un	secured Claims	5		
3.	Dο	any creditors have nonpriority unsecured	claims against you	?		
1	n	No. You have nothing to report in this part. So	•		with your other schedules.	
	乛	Yes.			,, ,	
			to the shahabadadaal		and the condition who had been defeated for an afficulty as a	. ()
					r of the creditor who holds each claim. If a creditor has more listed, identify what type of claim it is. Do not list claims already	
					Part 3.If you have more than four priority unsecured claims fill ou	
		ge of Part 2.			artom you have more analytical priority and course diamic in oc	
						Total claim
4.1	ΑI	llied Interstate LLC				\$361.00
7.1	N	onpriority Creditor's Name		Las	st 4 digits of account number 9365	Ψ501.00
	_	o Box 361445 umber Street		Wh	en was the debt incurred? 4/1/2016	
	IN	umber Street		As	of the date you file, the claim is: Check all that apply.	
	_				Contingent	
	_	olumbus Ohio	43236	Ħ	Unliquidated	
		ity State /ho incurred the debt? Check one.	Zip Code	H	•	
	Ü	TI Dalama Araba		ш	Disputed	
	Ē	Debtor 2 only		Тур	e of NONPRIORITY unsecured claim:	
	F	Debtor 1 and Debtor 2 only		Ш	Student loans	
	F	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce	
	F	=			that you did not report as priority claims	
	L	Check if this claim relates to a commun	ity debt	Ш	Debts to pension or profit-sharing plans, and other similar debts	
		the claim subject to offset?		<b>✓</b>	001 Collection; Collecting for	
	<u></u>	No			ORIGINAL CREDITOR: PŬBLIC	
	L	Yes			Other. Specify STORAGE	
4.2		ENTRAL CREDIT SERVICE		Las	st 4 digits of account number 3802	\$85.00
		onpriority Creditor's Name 550 REGENCY SQUARE BLVD			nen was the debt incurred? 4/1/2016	
		umber Street				
				As	of the date you file, the claim is: Check all that apply.	
	JA	ACKSONVILLE Florida	32225	Ш	Contingent	
		ity State	Zip Code		Unliquidated	
		/ho incurred the debt? Check one.			Disputed	
	¥	<b>_</b>		Тур	e of NONPRIORITY unsecured claim:	
	L	Debtor 2 only		П	Student loans	
		Debtor 1 and Debtor 2 only		Ħ	Obligations arising out of a separation agreement or divorce	
		At least one of the debtors and another		ш	that you did not report as priority claims	
		Check if this claim relates to a commun	ity debt		Debts to pension or profit-sharing plans, and other similar	
	ls	the claim subject to offset?			debts	
	V	No		✓	001 Collection; Collecting for ORIGINAL CREDITOR:	
	Г	Yes			Other. Specify MEDICAL PAYMENT DATA	
4.3	С	ENTRAL CREDIT SERVICE		,	d A Partie of account 1	\$85.00
1.0	N	onpriority Creditor's Name			st 4 digits of account number6882	Ψ00.00
		550 REGENCY SQUARE BLVD umber Street		Wh	en was the debt incurred? 4/1/2016	
	1 1	driber Street		As	of the date you file, the claim is: Check all that apply.	
		AOKOONI /II I E Electric	20005		Contingent	
		ACKSONVILLE Florida ity State	32225 Zip Code		Unliquidated	
		/ho incurred the debt? Check one.	F	П	Disputed	
	~	Debtor 1 only		Tvn	e of NONPRIORITY unsecured claim:	
		Debtor 2 only		,, <sub>P</sub>		
	Ē	Debtor 1 and Debtor 2 only		닏	Student loans	
	Ē	At least one of the debtors and another		Ш	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	F	Check if this claim relates to a commun	ity debt	П	Debts to pension or profit-sharing plans, and other similar	
	∟ le	the claim subject to offset?	acot	_	debts	
	J	No		✓	001 Collection; Collecting for	
	Ė	] Yes			ORIGINAL CREDITOR: Other. Specify MEDICAL PAYMENT DATA	

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Debto	or 1 Kinzie O	Harris	Case number (if known)	
	First Name Middle Name	Last Name		
Part 2	Your NONPRIORITY Unsecured Cla	ims - Continuation Page		
	After listing any entries on this page, number	them beginning with 4.5, follow	ved by 4.6, and so forth.	Total claim
4.4	CHICAGO PATROLMANS FCU Nonpriority Creditor's Name	Last 4 digits	of account number 000	\$2,000.00
	1359 W WASHINGTON BLVD	When was th	ne debt incurred? 4/1/20	<u>15</u>
	Number Street	As of the dat	e you file, the claim is: Check	all that apply
		Continge	•	αιι ιι αι αρριγ.
	OLHOAGO Hitaria	<b>≓</b>		
		p Code Unliquida		
	Who incurred the debt? Check one.	Disputed	PRIORITY unsecured claim:	
	Debtor 1 only			
	Debtor 2 only	Student lo		_
	Debtor 1 and Debtor 2 only		ns arising out of a separation ag did not report as priority claims	greement or divorce
	At least one of the debtors and another	_ ′	pension or profit-sharing plans,	and other similar
	Check if this claim relates to a community	debts debts		
	Is the claim subject to offset?	✓ Other. Sp	pecify 012 InstallmentLoa	<u>n</u>
	✓ No			
	Yes			
4.5	I C SYSTEM INC	Last 4 digits	of account number 6880	\$524.00
	Nonpriority Creditor's Name PO BOX 64378	ŭ	ne debt incurred? 8/1/20	
	Number Street			<del>. 5</del> .
			e you file, the claim is: Check	all that apply.
	SAINT PAUL Minnesota 58	5164 Continge		
	•	p Code Unliquida		
	Who incurred the debt? Check one.  Debtor 1 only	Disputed		
	Debtor 2 only	Type of NON	PRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student lo	oans	
	At least one of the debtors and another		ns arising out of a separation aodic did not report as priority claims	greement or divorce
	Check if this claim relates to a community		pension or profit-sharing plans,	and other similar
	Is the claim subject to offset?	debts	001 Collection; Collect	ing for
	✓ No	✓	ORIGINAL CREDIT	
	Yes	Other. Sp	pecify COMCAST	

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Kinzie Harris Debtor 1 Case number (if known) First Name Last Name Add the Amounts for Each Type of Unsecured Claim Part 4: Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$3,055.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$3,055.00 6j. Total. Add lines 6f through 6i. 6j.

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Fill in this information to identify your case:							
Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name	_			
Debtor 2 (Spouse, if filing	) First Name	Middle Name	Last Name	_			
United States B	ankruptcy Court for the:	Northern	District of Illinois (State)	_			
Case number (If known)			(Claid)	-			

0	ff	ici	al	F	or	m	۱ 1	0	6	G
_				-				_	_	_

Check if this is an amended filing

#### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this infor	mation to identify your cas	se:		
Debtor 1	Kinzie	0	Harris	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filir	g) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
	, ,		(State)	
Case number (If known)				
(II KIIOWII)				Chack if this is an
				Check if this is an amended filing
Official	Form 106H			3
Schedu	le H: Your C	odebtors		12/15
No Yes  Within th	ave any codebtors? (If y	ı lived in a community prop	• • • •	ebtor.)  mmunity property states and territories include Arizona, California,
		xico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	
	Go to line 3.			
Yes.		spouse, or legal equivalent liv	e with you at the time?	
뇓	No	atata antonii an Bilana Bara		the control of the co
Ш	Yes. In which community	state or territory did you live?	' Fill in 1	the name and current address of that person.
	Name of your spouse, f	former spouse, or legal equiv	/alent	_
	Number Street			_
	City	State	Zip Code	_
again as	a codebtor only if that p	person is a guarantor or co	osigner. Make sure you have	ur spouse is filing with you. List the person shown in line 2 e listed the creditor on <i>Schedule D</i> (Official Form 106D), e <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

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Fill in this information to identi	fv vour case:				
Debtor 1 Kinzie	0	Harris			
First Name	Middle Name	Last Name	)	_	
Debtor 2				_	Check if this is:
(Spouse, if filing) First Name	Middle Name	Last Name	)		An amended filing
United States Bankruptcy Court for the:	Northern	District of Illinois		_	A supplement showing post-petition chapter expenses as of the following date:
Case number (If known)		(State	*)	_	
					MM / DD / YYYY
Official Form 106l					
Schedule I: Your Inc	come				12/
dditional pages, write your n		(ii kilowii). Al	iswei ev	ory question	
<ol> <li>Fill in your employment information.</li> </ol>		Debtor 1			Debtor 2
	Employment status	<b>✓</b> Employed			Employed
If you have more than one job,		Not Employ	/ed		☐ Not Employed
attach a separate page with	Occupation	Security			
information about additional employers.	Employer's name	Allied Barton			-
Include part time, seasonal,	Employer's address	161 Washingto	n # 600		
or self-employed work.	zimpioyo. c dadi coo	Number Street			Number Street
Occupation may include student					
or homemaker, if it applies.		Conshohock	Pennsylva	ania 19428	
		en City	State	Zip Code	City State Zip Code
	How long employed there?	7 months		Zip code	
you are separated.  If you or your non-filing spouse have mattach a separate sheet to this form.	e date you file this form. If you	ne the information f	or all employ		the space. Include your non-filing spouse unless on on the lines below. If you need more space,  For Debtor 2 or non-filing spouse
<ol><li>List monthly gross wages, sala deductions.) If not paid monthly, o</li></ol>				\$1,820.00	
3. Estimate and list monthly ove	· · ·	3.		+ \$0.00	

\$1,820.00

4. Calculate gross income. Add line 2 + line 3.

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Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name		Case numbe	er (if i	known)		
	i iist ivaille	midule Name	Last Name		For Debtor 1		For Debtor 2 or non-filing spouse		
Сору	line 4 here		<b>→</b> 4.	_	\$1,820.00			l	
5. <b>List a</b>	ll payroll dedu								
		and Social Security deductions	5a	ı	\$256.45				
5b. <b>M</b>	landatory cor	ntributions for retirement plans	5b	).	\$0.00				
5c. <b>V</b>	oluntary cont	ributions for retirement plans	50	·.	\$0.00				
5d. <b>R</b>	equired repay	ments of retirement fund loans	5d	l	\$0.00				
5e. <b>I</b> n	surance		5e	<del>-</del>	\$0.00				
5f. <b>D</b> o	omestic supp	ort obligations	5f.		\$0.00				
	Inion dues	· ·	50	ı.	\$97.15				
Ū		ons. Specify:	-	' - 1. +	\$0.00	+			
		ductions. Add lines 5a + 5b + 5c + 5d + 5e +5		-	\$353.60				
7. Calcu	late total mor	nthly take-home pay. Subtract line 6 from line	4. 7.	-	\$1,466.40				
8. List a	II other incom	e regularly received:							
b	usiness, prof	om rental property and from operating a ession, or farm ent for each property and business showing gro	oss						
re		y and necessary business expenses, and the to		ı. <u> </u>	\$0.00				
8b. <b>I</b> n	terest and di	vidends	8b	)	\$0.00				
d	ependent reg	•	or a						
		spousal support, child support, maintenance, nt, and property settlement.	80	)	\$0.00				
8d. <b>U</b>	nemploymen	t compensation	8d	l	\$0.00				
8e. <b>S</b>	ocial Security		8e	<del>.</del>	\$0.00				
Ind as the su	clude cash assi sistance that yo e Supplementa ibsidies	ent assistance that you regularly receive istance and the value (if known) of any non-cast ou receive, such as food stamps (benefits unde al Nutrition Assistance Program) or housing	er		\$0.00				
	pecify:	leamont in come	8f.	_	\$0.00				
Ū		irement income	89		\$0.00				
	-	income. Specify:		). + <u>-</u>	\$0.00	+			
9. <b>Add a</b>	III other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- 8h. 9.	_	\$0.00	L			
		income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10 pouse	)	\$1,466.40	+		=	\$1,466.40
Includ relativ	de contributions ves.	ular contributions to the expenses that yo s from an unmarried partner, members of your hamounts already included in lines 2-10 or amounts	nousehold, your	r deper	ndents, your roommat				
Spec	ify:							11. +	\$0.00
		n the last column of line 10 to the amount in the Summary of Schedules and Statistical Sui						12.	\$1,466.40
									Combined monthly income
	No.	increase or decrease within the year after y	ou file this for	rm?					
Ш	Yes. Explain:								

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Fill in this inform	mation to identify your o	220.				
Fill In this infor	nation to identify your c	ase.				
Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name			
Debtor 2	Tilstrame	Wilddie Name	Lastivanic	Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filin	ď	
United States E	Bankruptcy Court for the	e: Northern	District of Illinois (State)	A supplement sh expenses as of the	owing post-petitic	on chapter 13
Case number			(Glale)	expenses as or tr	ie ioliowing date.	
(If known)				MM / DD / YYYY	<del>,</del>	
Official	Form 106J					
	-	•				
Scheau	le J: Your E	xpenses				12/15
			e filing together, both are equally			b.a.r
	more space is neede wer every question.	d, attach another sheet to this	form. On the top of any additiona	i pages, write your na	me and case nu	ımber
Part 1: Des	cribe Your House	hold				
1. Is this a join	nt case?					
✓ No. Go	to line 2					
Yes. D	oes Debtor 2 live in a	separate household?				
	No	·				
_ L	_	file Official Former 400 LO. Former	and for Communications and a final of Control	0		
	<del>-</del>		ses for Separate Household of Debto	or 2.		
2. Do you hav dependents?		No				
Do not list D	ebtor 1 and	Yes. Fill out this information for	Dependent's relationship to	Dependent's	Does depend	dent live
Debtor 2.		each dependent	Debtor 1 or Debtor 2	age	with you? No.	
			Child	4 years	✓ Yes.	
3. Do vour ex	penses include					
expenses of		No				
than yourself and	d vour	Yes				
dependent	•					
Dort O: Foti	mata Vaur Ongoir	ag Monthly Evnances				
		ng Monthly Expenses				
_	of a date after the bar		you are using this form as a supp plemental Schedule J, check the	•	-	
	•	n-cash government assistance d it on <i>Schedule I: Your Incom</i> e	-		Yo	ur expenses
	or home ownership e	expenses for your residence. In	clude first mortgage payments and		4.	\$650.00
If not incl	uded in line 4:					
4a. Real e	state taxes				4a	\$0.00
4b. Proper	ty, homeowner's, or rer	nter's insurance			4b.	\$0.00
4c. Home	maintenance, repair, an	d upkeep expenses			4c.	\$0.00
4d. Home	owner's association or o	condominium dues			4d.	\$0.00

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Case number (if known)

Harris

Debtor 1

Kinzie

First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$0.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$150.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$400.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services \$100.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$175.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$250.00 15b 15c. Vehicle insurance 15c \$0.00 15d. Other insurance. Specify: \_\_\_ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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Debtor 1	Kinzie	0	Harris	Case number (if known)					
	First Name	Middle Name	Last Name						
21.Other	. Specify:				21	\$0.00			
22. Calcu	ılate your monthly expen	ises.				\$1,825.00			
22a. <i>A</i>	add lines 4 through 21.					\$0.00			
22b. C	Copy line 22 (monthly expe	nses for Debtor 2), if any, fro	m Official Form 106J-2			\$1,825.00			
22c. A	dd line 22a and 22b. The r	esult is your monthly expens	ses.		22.				
23.Calcu	late your monthly net inc	come.							
23a. C	23a. Copy line 12 (your combined monthly income) from Schedule I.								
23b. C	Copy your monthly expenses		23b	\$1,825.00					
	.,,		230						
	subtract your monthly exper The result is your monthly r	23c	(\$358.60)						
	The recall to your monthly t	iot incomo.			230				
24. <b>Do y</b> o	ou expect an increase or	decrease in your expense	es within the year after you	ı file this form?					
For e	example, do you expect to fi	inish paving for your car loar	n within the year or do you exp	pect your					
			nodification to the terms of yo						
<b>√</b> 1	No								
	/a-a								
, LJ,	⁄es								
	Explain here:								

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Fill in this information to identify your case:								
Debtor 1	Kinzie	0	Harris					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing) First Name		Middle Name	Last Name	<u>_</u>				
United States Bankruptcy Court for the:		Northern	District of Illinois					
			(State)					
Case number (If known)								

### Official Form 106Dec

Check if this is a
amended filing

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below						
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?						
	✓ No						
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).					
	Under penalty of periury I declare that I have read the summary are	and schedules filed with this declaration and					
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
×	/s/ Kinzie Harris	×					
	Signature of Debtor 1	Signature of Debtor 2					
	Date 10/25/2016	Date					
	MM/DD/YYYY	MM/DD/YYYY					

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Fill in this information to identify your case:						
Debtor 1	Kinzie	0	Harris			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing) First Name		Middle Name	Last Name			
United States Bankruptcy Court for the:		Northern	District of Illinois			
			(State)			
Case number						
(If known)						

### Official Form 107

Check if this is an amended filing

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before									
1.	. What is your current marital status?								
	Married ✓ Not married								
2.									
	<ul><li>No</li><li>✓ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.</li></ul>								
	Del	Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there	
						Same as D	Debtor 1		Same as Debtor 1
		05 N Ridge			From 12/30/12			From	
	Number Street				Number Street				
					To <u>1/1/15</u>		To		
		icago	Illinois	60645					
	City	У	State	Zip Code		City	State	Zip Code	
	Number Street			Same as Debtor 1			Same as Debtor 1		
			From	Number Street			From		
				То				То	
	City	y	State	Zip Code		City	State	Zip Code	
					ouse or legal equivalent in , Nevada, New Mexico, Puerl				mmunity property states and
✓ No									
		Make sure voi	u fill out Sche	edule H: Your Code	ebtors (Official Form 106H).				
	L 103.1	viano outo you	Out Ool (	544.5 FT. 1041 5040	Store (Smooth Form 10011).				

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Deb	tor 1		Harris		se number (if known)					
		1	Name Last N	ame						
Part	2:	Explain the Sources of Your	Income							
	Fill i	you have any income from employm n the total amount of income you receive ities. If you are filing a joint case and you No Yes. Fill in the details.	ed from all jobs and all busir	nesses, including part-time		years?				
			Debtor 1		Debtor 2					
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)				
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$11125.91	<ul><li></li></ul>					
		or last calendar year: lanuary 1 to December 31, 2015 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$25000.00	Wages, commissions, bonuses, tips Operating a business					
		or the calendar year before that: lanuary 1 to December 31, 2014 ) YYYY	Wages, commissions, bonuses, tips Operating a business	\$10000.00	Wages, commissions, bonuses, tips Operating a business					
 	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.									
			Debtor 1		Debtor 2					
			Sources of income Describe below.	Gross income from each source (before deductions are exclusions)	Describe below.	Gross income from each source (before deductions and exclusions)				
		From January 1 of current year until he date you filed for bankruptcy:								
		For last calendar year:  January 1 to December 31, 2015 )  YYYY								
		For the calendar year before that:  January 1 to December 31, 2014 )  YYYYY								

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Debtor	1	Kinzie First Name		O Middle Name	Harris Last Name	Case numbe	r (if known)			
Part 3:			n Payments	You Made Be	efore You Filed for	Bankruptcy				
6. Are	_			•	ily consumer debts?					
L	] N			ebtor 2 has prim amily, or househol		Consumer debts are defined in	ı 11 U.S.C. § 101(8) as "incu	rred by an individual		
		During the	90 days before	e you filed for bank	kruptcy, did you pay any cr	editor a total of \$6,425* or more	e?			
		No. G	o to line 7.							
			total amount y	ou paid that credit	or. Do not include paymer	* or more in one or more paym nts for domestic support obligat o an attorney for this bankrupto	tions, such as			
	* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.									
<b>✓</b>	Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.									
	During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?									
	✓ No. Go to line 7.									
	Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.									
					Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	(	Creditor's Nam	ne					Mortgage		
	1	Number Street						Car Credit card		
	_							Loan repayment Suppliers or		
	(	City	State	Zip Code				vendors  Other		
	(	Creditor's Nam	ne					Mortgage Car		
	1	Number Street						Credit card		
	_							Loan repayment		
	(	City	State	Zip Code				Suppliers or vendors		
								Other		
	(	Creditor's Nam	ne					Mortgage		
	1	Number Street						Car Credit card		
	_							Loan repayment		
	(	City	State	Zip Code				Suppliers or vendors		
		,		r				Other		

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Debtor 1	Kinzie		0	Ha	ırris	Case number (	if known)
	First Name		Middle Name	Las	st Name		
Insi corp age	ders include your porations of which	relatives; an you are an o or a busines	y general partners officer, director, pe s you operate as a	relatives of any rson in control, or	owner of 20% or mo	tnerships of which y are of their voting se	ho was an insider?  You are a general partner;  Curities; and any managing  Pemestic support obligations,
✓	No						
	Yes. List all paym	ents to an ir	nsider.				
				Dates of	Total amount	Amount you	Reason for this payment
				payment	paid	still owe	
	Insider's Name						
	Number Street						
	City	State	Zip Code				
	Insider's Name		-	_			
	Number Street						
	City	State	Zip Code				
insi	der?	lebts guaran	nteed or cosigned b			<b>, p</b> p, o	n account of a debt that benefited an
Ц	res. List all payiti	enis inai bei	nented an insider.	Dates of	Total amount	Amount you	Pageon for this payment
				payment	paid	still owe	Reason for this payment
							Include creditor's name
	Insider's Name						
	Number Street						
	Number Street						
	City	State	Zip Code				
	Insider's Name						
	Number Street						
	Number Street						
	City	State	Zip Code				

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Debt	or 1	Kinzie	O Middle Nove		Harris	Ca	se number (if k	rnown)	
		First Name	Middle Name		Last Name				
Part	4:	Identify Legal A	Actions, Reposses	sions,	and Foreclosure	es			
l	_ist a		u filed for bankruptcy, ding personal injury case						ng? r custody modifications, and
		No Yes. Fill in the details							
	<b>Y</b>	res. I iii iii tile detaile	·	Moturo	of the case	Court or ag	anno.		Status of the case
		Case title		Contrac			-		
		Chicago Patrolmei	n's Federal CU v	Contrac	A.		y Circuit Cou	t	✓ Pending
		Kinzie Harris				Court Name	e Ishington Stre	et	On appeal
		Case number				NumberStre		<u> </u>	Concluded
		16m2002011				Chicago	Illinois	60602	
						City	State	Zip Code	
		Case title							Pending
		-				Court Name	)		On appeal
		Case number				NumberStre	not .		Concluded
		-				Numbersite	.c.		_
						City	State	Zip Code	
		Yes. Fill in the inform	mation below.		Describe the prop	erty		Date	Value of the property
		Creditor's Name							
					Explain what happ	ened			
		Number Street							
					Property was re	epossessed.			
					Property was fo				
					Property was g	arnished.			
		City	State Zip Cod	le	Property was a	ttached, seized, o	r levied.		
					Describe the prop	erty		Date	Value of the property
		Creditor's Name							
					Explain what happ	ened			
		Number Street							
					Property was re	epossessed.			
		-			Property was fo	oreclosed.			
					Property was g	arnished.			
		City	State Zip Cod	le	Property was a	ttached, seized, o	r levied.		

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Debto	r 1	Kinzie First Name	O Middle Name	Harris Last Name	Case number (if known)		
		hin 90 days before you filed f ounts or refuse to make a pay			ank or financial institution, s	et off any amou	nts from your
	<b>✓</b>	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
		nin 1 year before you filed for ointed receiver, a custodian,		of your property in the p	oossession of an assignee f	or the benefit of o	creditors, a court-
[	<b>✓</b>	No Yes					
Part 5		List Certain Gifts and (					
13.	Wi	thin 2 years before you filed  No	for bankruptcy, did yo	ou give any gifts with a to	tal value of more than \$600	per person?	
		Yes. Fill in the details for each					
		Gifts with a total value of m per person	ore than \$600	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave the	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

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Debt	tor 1	Kinzie First Name	O Middle Name	Harris Last Name	Case number (if known)		
14.	Wit	hin 2 years before you filed fo  No  Yes. Fill in the details for each of		u give any gifts or contribu	tions with a total value of	more than \$600 t	o any charity?
		Gifts or contributions to chat that total more than \$600	•	Describe what you contri	buted	Date you contributed	Value
		Charity's Name					
		Number Street					
Part		City State  List Certain Losses	Zip Code				
15.		hin 1 year before you filed for hibling?  No Yes. Fill in the details.  Describe the property you lo how the loss occurred	. ,	Describe any insurance of Include the amount that insupending insurance claims on A/B: Property.	overage for the loss urance has paid. List	Date of your loss	Value of property lost
Part	7:	List Certain Payments o	r Transfers				
16.	abo	hin 1 year before you filed for ut seeking bankruptcy or prep ude any attorneys, bankruptcy pe	oaring a bankruptcy	petition?			nyone you consulted
		No Yes. Fill in the details.	. ,	3.0	, ,	1	
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
		LAW FIRM		Attorney's Fee - 0.00		10/25/2016	\$0.00
		Person Who Was Paid  20 S. Clark Street  Number Street					
		28th Floor					
		ChicagoIllinoisCityState	60603 Zip Code				
		Email or website address None					
		Person Who Made the Paymen	t, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Paymen	t. if Not You				

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Deb	tor 1	Kinzie	0		e number (if known)		
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed for byou deal with your creditors not include any payment or transi No Yes. Fill in the details.	or to make payments		pay or transfer a	ny property to any	one who promised to
	Ш	res. Fill III the details.				_	
				Description and value of any prope transferred	erty		Amount of payment
		Person Who Was Paid	_				
		Number Street	-				
		City	Zio Codo				
		City State	Zip Code				
	Inclu	ordinary course of your busing ude both outright transfers and to sfers that you have already listed No Yes. Fill in the details.	ransfers made as secur	ity (such as the granting of a security in	terest or mortgag	e on your property).	Do not include gifts and
				Description and value of any property transferred	Describe any payments re in exchange	property or ceived or debts pa	Date id transfer was made
		Person Who Received Transfe	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transfe	Pr				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed fese are often called asset-protec		u transfer any property to a self-sett	ed trust or simila	ar device of which	you are a beneficiary?
		No Yes. Fill in the details.					
	Ц	103. I III III UIG UCIAIIS.		Description and value of the prop	erty transferred		Date transfer was made
		Name of trust					

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Debt	or 1	Kinzie First Name	O Middle Name	Harris Last Name		Case n	number (if known)		_
Part	8:	List Certain Financial				xes, and	Storage Units		
20.	With mov Inclu	nin 1 year before you filed to yed, or transferred? Ide checking, savings, money peratives, associations, and o	for bankruptcy, we	re any financial acc	ounts or instr	uments he	ld in your name, or f		
		No Yes. Fill in the details.		Last 4 digits of number	account	Type of a	account or	Date account was	Last balance before
								closed, sold, moved, or transferred	closing or transfer
		Person Who Was Paid		XXXX-		Chec	_		
		Number Street					ey market erage r		
		City State	Zip Code						
		Person Who Was Paid		XXXX-		Chec	_		
		Number Street					ey market erage		
						Othe	=		
		City State	Zip Code	•					
21.	othe	you now have, or did you her valuables?  No  Yes. Fill in the details.	ave within 1 year b			ny safe dep		·	
				Who else had acc	cess to it?		Describe the conte	ents	Do you still have it?
		Name of Financial Institution	n	Name					☐ No ☐ Yes
		Number Street		Number Street					
				City St	ate Zip	Code			
22	Lleve	City State	Zip Code	aa adhar dhan waxr l	hama within 1	voor before	e ver filed for books	ta.:2	
22.		e you stored property in a solution.  No Yes. Fill in the details.	storage unit or pia	ce omer man your i	nome within i	year beror	e you med for banki	upicy ?	
		res. Fill in the details.		Who else had acc	cess to it?		Describe the conte	ents	Do you still have it?
		Name of Storage Facility		Name					□ No
		Number Street		Number Street					Yes
				City St	ate Zip	Code			
		City State	Zip Code						

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		Harris Case number (if known)	
	First Name Middle Nar		
rt 9:	Identify Property You Hold or C	Control for Someone Else	
. Do	you hold or control any property that so	someone else owns? Include any property you borrowed from, are storing for, or hold	in trust for
SOI	meone.		
<b>✓</b>	No		
	Yes. Fill in the details.		
		Where is the property? Describe the contents	Value
	Owner's Name	Number Street	
	Number Street	<del></del>	
		<u></u>	
		City State Zip Code	
	City State Zip Code	<u> </u>	
mt 40-	Cive Details About Environme	mtal Information	
rt 10:	Give Details About Environme	intai iniorination	
or the	purpose of Part 10, the following definitions	apply:	
	•	e, or local statute or regulation concerning pollution, contamination, releases of	
		naterial into the air, land, soil, surface water, groundwater, or other medium, the cleanup of these substances, wastes, or material.	
	S <i>ite</i> means any location, facility, or property a or used to own, operate, or utilize it, includin	as defined under any environmental law, whether you now own, operate, or utilize it	
	<i>Hazardous material</i> means anything an envil oxic substance, hazardous material, pollutal	ironmental law defines as a hazardous waste, hazardous substance,	
	one outstands, nazarasas material, policial	and, containing of contain term.	
eport	all notices, releases, and proceedings that yo	ou know about, regardless of when they occurred.	
		·	?
	s any governmental unit notified you tha	ou know about, regardless of when they occurred.  at you may be liable or potentially liable under or in violation of an environmental law	?
	s any governmental unit notified you tha	·	?
	s any governmental unit notified you tha	at you may be liable or potentially liable under or in violation of an environmental law	
	s any governmental unit notified you tha	·	Pate of notice
	s any governmental unit notified you that  No Yes. Fill in the details.	at you may be liable or potentially liable under or in violation of an environmental law	Date of
	s any governmental unit notified you tha	at you may be liable or potentially liable under or in violation of an environmental law	Date of
	s any governmental unit notified you that  No Yes. Fill in the details.	Governmental unit  Environmental law, if you know it	Date of
	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Governmental unit  Governmental unit  Governmental unit	Date of
	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site	Governmental unit  Governmental unit  Governmental unit  Governmental unit  Governmental unit	Date of
	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of
. Ha	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code	Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of
. Ha	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site  Number Street	Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of
. Ha	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code	Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of
. Ha	s any governmental unit notified you that  No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit of	Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of
. Ha	s any governmental unit notified you that No  Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit o	Governmental unit  Governmental unit  Governmental unit  City State Zip Code	Date of notice
. Ha	s any governmental unit notified you that No  Yes. Fill in the details.  Name of site  Number Street  City State Zip Code  ve you notified any governmental unit o	Governmental unit  Governmental unit  Governmental unit  Number Street  City State Zip Code  of any release of hazardous material?	Date of notice
. Ha	s any governmental unit notified you that No No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code ve you notified any governmental unit o  No Yes. Fill in the details.	Governmental unit  Governmental unit  Governmental unit  Number Street  City State Zip Code  Of any release of hazardous material?  Governmental unit  Environmental law, if you know it  Environmental law, if you know it	Date of notice
. Ha	s any governmental unit notified you that No No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit  Governmental unit  City State Zip Code  Governmental unit  Covernmental unit  Environmental law, if you know it  Governmental unit  Environmental law, if you know it	Date of notice
. Ha	s any governmental unit notified you that No No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code ve you notified any governmental unit o  No Yes. Fill in the details.	Governmental unit  Governmental unit  Governmental unit  Number Street  City State Zip Code  Of any release of hazardous material?  Governmental unit  Environmental law, if you know it  Environmental law, if you know it	Date of notice
. Ha	s any governmental unit notified you that No No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit  Governmental unit  Governmental unit  Number Street  City State Zip Code  of any release of hazardous material?  Governmental unit  Environmental law, if you know it  Environmental law, if you know it  Environmental law, if you know it  Environmental law, if you know it	Date of notice
. Ha	s any governmental unit notified you that No No Yes. Fill in the details.  Name of site  Number Street  City State Zip Code ve you notified any governmental unit of No Yes. Fill in the details.	Governmental unit  Governmental unit  City State Zip Code  Governmental unit  Covernmental unit  Environmental law, if you know it  Governmental unit  Environmental law, if you know it	Date of notice

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Deb	tor 1	Kinzie		0	Harris	Case	number (if known)	
		First Name		Middle Name	Last Name			
26	<b>⊔</b> av	o vou boon a narti	, in any judic	ial or administr	ativo proceeding under	any anyiranmanta	I law? Include settlements and order	•
26.	пач	e you been a party	in any judic	aai or administra	ative proceeding under	any environmenta	il law? include settlements and order	S.
	<b>✓</b>	No						
	П	Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					count or agono,			case
		Case title						_
								Pending
		-			Court Name			On appeal
		Case number			Number Street			оп арреа
		Case Humber						Concluded
					City State	Zip Code		
		•			Oity Claic	Zip Code		
Part	:11:	Give Details A	bout Your	<b>Business</b> or	Connections to Ar	y Business		
27.	Witl	nin 4 years before	you filed for	bankruptcy, did	you own a business or	have any of the fo	ollowing connections to any business	<b>;</b> ?
							and time	
				-	profession, or other activit		part-time	
				ty company (LLC)	) or limited liability partners	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or mana	ging executive of	a corporation			
		An owner of at	least 5% of the	he voting or equity	y securities of a corporation	n		
			0	. 5 . 40				
	띹	No. None of the abo						
	Ш	Yes. Check all that	apply above a	ind fill in the detail	s below for each business			
					Describe the natu	re of the busines	• •	
							include Social Security nu	umber or ITIN.
					_		EIN:	
		Business Name						
		Novel on Others			_		Dates business existed	
		Number Street			Name of account	ant or bookkeepe		
						•		
		City	State	Zip Code			From To	
					Describe the natu	re of the busines	s Employer Identification n	umber Do not
							include Social Security no	
							EIN:	
		Business Name			_		LIIV.	
		Number Street					Dates business existed	
					Name of account	ant or bookkeepe		
		City	State	Zip Code			From To	
		•		•				
					Describe the natu	ire of the busines		
							include Social Security no	umber or IIIN.
		Busines N			_		EIN:	
		Business Name						
					_		Dates business existed	
		Number Street			Name of account	ant or bookkeene		
						a or bookkeepe		
		City	State	Zip Code			From To	<del></del>

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Debto		linzie	0	Harris	Case number (if known)
	Fi	irst Name	Middle Name	Last Name	
		n 2 years before you filed for ors, or other parties.	bankruptcy, did you	ı give a financial stateme	nt to anyone about your business? Include all financial institutions,
[	V N	lo es. Fill in the details below.			
				Date issued	
	,	Name		MM/DD/YYYY	
		Number Street			
		City State	Zip Code		
Part 1	2: 5	Sign Below			
tr	ue an	d correct. I understand that	making a false state	ment, concealing proper	nts, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		/s/ Kinzie Harris	<b>S</b>		×
		Signature of Debtor	1		Signature of Debtor 2
		Date 10/25/2016			Date
D	id you	u attach additional pages to	Your Statement of F	inancial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
·	No				
	Yes	S			
D	id you	u pay or agree to pay someo	ne who is not an atto	orney to help you fill out b	ankruptcy forms?
V	No	)			
	Ye	s. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this information to identify your case:							
Debtor 1	Kinzie	0	Harris				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if fill	ing) First Name	Middle Name	Last Name				
United States	Bankruptcy Court for the:	Northern	District of Illinois	_			
Case number (If known)			(State)	_			

Check if this	is an
amended	filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

- If you are an individual filing under chapter 7, you must fill out this form if:
- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

### Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

information below.		
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the prop as exempt on Schedule
Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.
Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.
Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.
Creditor's name:  Description of property securing debt:	Surrender the property.  Retain the property and redeem it.  Retain the property and enter into a Reaffirmation Agreement.  Retain the property and [explain]:	No. Yes.

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Debtor	Kinzie	0	Harris	Case number (if
1	First Name	Middle Name	Last Name	known)
! V				Part 2:
	ur Unexpired Personal Pr		Pahadula C. Evasutani Can	weets and Unavaried Laces (Official Form 1066) fill in the
informa		ate leases. Unexpired lea	ases are leases that are still	tracts and Unexpired Leases (Official Form 106G), fill in the in effect; the lease period has not yet ended. You may assume )(2).
Des	scribe your unexpired personal	property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Les	sor's name:			No Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	scription of leased perty:			
Les	sor's name:			□ No □ Yes
	scription of leased perty:			
Part 3:	Sign Below			
Unde			intention about any proper	ty of my estate that secures a debt and any personal
		-	4.0	
_	/s/ Kinzie Harris ignature of Debtor 1		Signature	e of Debtor 1
				OI DEDIOI I
D	ate 10/25/2016 MM/DD/YYYY		Date MI	W/DD/YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

## Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

## Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

#### **Northern District of Illinois**

In re	Kinzie O Harris	Case No.	
_	Debtor		(If known)
		Chapter _	Chapter 7
	DISCLOSURE OF COMP	ENSATION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bank that compensation paid to me within one year services rendered or to be rendered on behal is as follows:	r before the filing of the petition in bankrupto	y, or agreed to be paid to me, for
	For legal services, I have agreed to accept		\$700.00
	Prior to the filing of this statement I have rec	eived	\$0.00
	Balance Due		\$700.00
2.	The source of the compensation paid to me w	/as:	
	<b>✓</b> Debtor	Other (specify)	
3.	The source of the compensation paid to me is	s:	
	Debtor	Other (specify)	
4.	I have not agreed to share the above-disc members and associates of my law firm.	closed compensation with any other person	unless they are
		ed compensation with a other person or pers A copy of the agreement, together with a list s attached.	
5.	In return for the above-disclosed fee, I have a a. Analysis of the debtor's financial situat bankruptcy;	agreed to render legal service for all aspect tion, and rendering advice to the debtor in de	
	b. Preparation and filing of any petition,	schedules, statements of affairs and plan wh	nich may be required;
	c. Representation of the debtor at the me	eeting of creditors and confirmation hearing,	and any adjourned hearings thereof;
6.	By agreement with the debtor(s), the above-d	lisclosed fee does not include the following s	services:
		CERTIFICATION	
	I certify that the foregoing is a complete staten the debtor(s) in this bankruptcy proceedings.	nent of any agreement or arrangement for p	ayment to me for representation
	10/25/2016	/s/ Mike Miller	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Harris, Kinzie O	Case No.	Case No.				
	Debtor(s)	0400 140.					
		Chapter.	Chapter7				
	VERIFICATION OF CREDITOR MATRIX						
	The above named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.						
Date:	10/25/2016	/s/ Harris, Kinzie O					
		Harris, Kinzie O					
		Signature of Debtor					

CHICAGO PATROLMANS FCU 1359 W WASHINGTON BLVD CHICAGO , IL 60607

I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164

Allied Interstate LLC Po Box 361445 Columbus , OH 43236

CENTRAL CREDIT SERVICE Po Box 15118 Jacksonville , FL 32239

CENTRAL CREDIT SERVICE Po Box 15118 Jacksonville , FL 32239

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0	Harris	Case number (if known)	
"incurred by an individ No. Go to line 16b. Yes. Go to line 17.  16b. Are your debts primal money for a business of No. Go to line 16c. Yes. Go to line 17.	ual primarily for a pers rily business debts? <i>I</i> or investment or throu	sonal, family, or househ Business debts are debt gh the operation of the	old purpose." s that you incurred to obtain business or investment.
Yes. I am filing under Chap	oter 7. Do you estimate t	hat after any exempt prop e to distribute to unsecure	ed creditors?
✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001-1	0,000	25,001-50,000 50,001-100,000 More than 100,000
\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	,001-\$50 million ,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,000 \$50,000	,001-\$50 million ,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Lhave exemined this petition	a and I dealars under	popalty of porjuny that t	he information provided is true and
correct.  If I have chosen to file under of title 11, United States Counder Chapter 7.  If no attorney represents me out this document, I have obten the connection with a bankrupte both. 18 U.S.C. §§ 152, 134  /s/ Kinzie Harris Signature of Debtor 1  Executed on	c Chapter 7, I am awarded. I understand the relation and I did not pay or a citained and read the new with the chapter of the statement, concealing by case can result in first, 1519, and 3571.	e that I may proceed, if celief available under each gree to pay someone wotice required by 11 U. itle 11, United States Copproperty, or obtaining	eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed who is not an attorney to help me fill S.C. § 342(b). Tode, specified in this petition.  money or property by fraud in imprisonment for up to 20 years, or
	stions for Reporting Purpose  16a. Are your debts primare "incurred by an individed with No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primare money for a business of No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts  No. I am not filing under Chaperses are paid the expenses are paid the expe	stions for Reporting Purposes  16a. Are your debts primarily consumer debts?  "incurred by an individual primarily for a pers  No. Go to line 16b.  Yes. Go to line 17.  16b. Are your debts primarily business debts? A money for a business or investment or throuth No. Go to line 16c.  Yes. Go to line 17.  16c. State the type of debts you owe that are not No. I am not filing under Chapter 7. Go to line 18.  Yes. I am filing under Chapter 7. Do you estimate the expenses are paid that funds will be available No.  Yes.  Yes.  1-49  100-199  100-199  200-999  30-\$50,001-\$100,000  \$10,0001-\$500,000  \$50,001-\$1 million  \$100,001  \$50,001-\$1 million  100,001  100,001-\$500,000  \$50,001-\$1 million  1100,000  \$100,001-\$500,000  \$50,001-\$1 million  1100,000  1100,001-\$500,000  1100,001-\$500,000  1100,001-\$1 million  1100,000  1100,001-\$1 million  1100,001-\$1 million  1100,000  1100,000  1100,000  110	Istions for Reporting Purposes  16a. Are your debts primarily consumer debts? Consumer debts are designation in incurred by an individual primarily for a personal, family, or househ incurred by an individual primarily for a personal, family, or househ incurred by an individual primarily for a personal, family, or househ incurred by an individual primarily for a personal, family, or househ incurred by an individual primarily for a personal, family, or househ incurred by an individual primarily for a personal, family, or househ incurred by a family and a family, or househ incurred by a family and a fam

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		Doo	cument Page s	57 of 61	
Fill in this infor	mation to identify your or	aca:			
Fill in this intor	mation to identify your ca				
Debtor 1	Kinzie First Name	O Middle Name	Harris Last Name		
Debtor 2	1 (13t Name	IIII Galo I I Galo I			
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					Check if this is a
Official	Form 106De	eC.			amended filing
		<del></del>			12/1
Declara <sup>*</sup>	tion About an	Individual Debt	or's Schedule	5	12/1
Part 1: Sig		eone who is NOT an attorn	ey to help you fill out bal	nkruptcy forms?	
✓ No			Attack Dankminton	/ Petition Preparer's Notice, De	oclaration and
Yes.	Name of person		Signature (Official	Form 119).	olaration, and
Under p	enalty of perjury, I decla	re that I have read the sum	nmary and schedules file	d with this declaration and	
that the	y are true and correct.	1000			
St. Western Committee Committee	zie Harris	U B Mines	ж		9
Signature	e of Debtor 1	gennessoo 🕶 evistiin vale 🕏 ritter listarantenakeisi (littich	Signatu	re of Debtor 2	

MM/DD/YYYY

Date

Date 10/25/2016

MM/DD/YYYY

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Debtor 1	Kinzie	0	Harris	Case number (if known)
2 35 (6) 1	First Name	Middle Name	Last Name	
28. Wit	thin 2 years before you editors, or other parties No	filed for bankruptcy, did y s.	ou give a financial stateme	ent to anyone about your business? Include all financial institutions,
	Yes. Fill in the details I	below.		
			Date issued	
	Name		MM/DD/YYYY	• 1
	Number Street			
	City S	tate Zip Code		
	: Sign Below			
Part 12	Sign below			
true	and correct. I understankruptcy case can rest	and that making a false st	atement, concealing prope	nents, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	✗ /s/ Kinz	zie Harris Woodu	D) Lind	×
	Signature of	of Debtor 1	<del>- 191</del> -	Signature of Debtor 2
	Date 10/25	5/2016		Date
Did	you attach additional p	pages to Your Statement o	of Financial Affairs for Indiv	iduals Filing for Bankruptcy (Official Form 107)?
7	No			
	Yes			
Did	you pay or agree to pay	y someone who is not an a	attorney to help you fill out	bankruptcy forms?
V	No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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ebtor	Kinzie	0	Harris	Case number (if
	First Name	Middle Name	Last Name	known)
art 2:	List Your Unexp	ired Personal Property Lea	ses	
format	ion below. Do not	I property lease that you listed list real estate leases. Unexpir onal property lease if the truste	ed leases are leases that a	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Des	cribe your unexpir	ed personal property leases		Will the lease be assumed?
Les	sor's name:			□ No □ Yes
	cription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	cription of leased perty:			
Les	sor's name:			☐ No ☐ Yes
	cription of leased perty:			
Les	sor's name:			No Yes
	scription of leased perty:			
Les	sor's name:			No Yes
	scription of leased perty:			
Les	sor's name:			No Yes
	scription of leased perty:			
Les	sor's name:			No Yes
	scription of leased perty:			
art 3:	Sign Below			
prop	erty that is subjec	y, I declare that I have indicate to an unexpired lease.	×	property of my estate that secures a debt and any personal
D	MM/DD/YYYY		Da	MM/DD/YYYY

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### UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Harris, Kinzie O	Case No		
	Desitor(s)	Chapter	Chapter7	
	VERIFICA.	TION OF CREDITOR MAT	RIX	
Th knowledge	ne above named Debtors hereby verify that.	at the attached list of creditors is tr	rue and correct to the best of their	
Date:	10/25/2016	/s/ Harris, Kinzie Harris, Kinzie O Signature of Dei	o Mozne & Hurs	

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Debtor 1 Kinzie	0	Harris	Case number (	f known)	
First Name	Middle Name	Last Name	0.1	Column B	
			Column A Debtor 1	Debtor 2 or non-filing spouse	
8. Unemployment compensation			\$0.00		
Do not enter the amount if you c under the Social Security Act. Ins	ontend that the amount tead, list it here:	ψ-		0.	
For you		\$0.00			
For your spouse		\$0.00			
9.Pension or retirement income benefit under the Social Security	Act.		\$0.00		
10.Income from all other source amount. Do not include any ben payments received as a victim of international or domestic terrorisr page and put the total below.	efits received under the S a war crime, a crime aga	Social Security Act or inst humanity, or			
			<del></del>		
Total amounts from separate pag	ges, if any.		+\$0.00	+	
11. Calculate your total current	monthly income. Add l	nes 2 through 10 for	\$1,714.32	+	= <u>\$1,714.32</u>
each column. Then add the total fo	r Column A to the total fo	or Column B.			
					Total current
Part 2: Determine Whether t	the Maone Toot Appl	ios to Vou			monthly income
<ol> <li>Calculate your current month</li> <li>Copy your total current mo</li> </ol>			,	Copy line 11 here →	\$1,714.32
Multiply by 12 (the numbe	r of months in a year).				X 12
12b. The result is your annual in	come for this part of the	form.		12b.	\$20,571.84
					•
13 Calculate the median family i	ncome that applies to	you. Follow these steps:			
Fill in the state in which you live.		Illinois			
		2			
Fill in the number of people in y				10	
Fill in the median family income household.				13.	<u>\$63,896.00</u>
To find a list of applicable media instructions for this form. This li	an income amounts, go o st may also be available a	online using the link speci at the bankruptcy clerk's o	fied in the separate office.		
14. How do the lines compare?					
14a. Line 12b is less than of Go to Part 3.	or equal to line 13. On the	e top of page 1, check bo	ox 1, There is no presumpti	on of abuse.	
14b. Line 12b is more than Go to Part 3 and fill ou	line 13. On the top of part of the top of t	age 1, check box 2, The p	oresumption of abuse is de	termined by Form 122A-2.	
Part 3: Sign Below					
By signing here, I declare under	er penalty of perjury that t	he information on this sta	atement and in any attachm	ents is true and correct.	
	a th	1-72			
🗶 /s/ Kinzie Harris 🦯 🎉	man 6 h	ve s	(		_
Signature of Debtor 1	- 54		Signature of Debtor 2		<del>10</del> .
Date 10/25/2016			Date 10/25/2016		
MM/DD/YYYY			MM/DD/YYYY		
If you checked line 14a, do l If you checked line 14b, fill o	NOT fill out or file Form 1 out Form 122A-2 and file	22A-2. it with this form.			